PTO/SB/22 (12-04)

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OF THE UNDER 27 CER 4 400(2)

DETITION FOR EXTENSION OF TIME UNDER 27 CER 4 400(2)

FY 2005	714	ket Number (Optior 595.114	naı)		
(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4		Filed July 21, 2003			
Application Number 10/604,437					
PETITION FOR EXTENSION OF TIME UNDER 37 CFR FY 2005 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4) Polication Number 10/604,437 For: ONE-PIECE INTEGRATED SNAP FASTENING MEC					
Art Unit 3635	Exa	Examiner Thissell, Jennifer I.			
This is a request under the provisions of 37 CFR 1.136(a) to exte application.	nd the period for filir	ig a reply in the abov	e identified		
The requested extension and fee are as follows (check time perio	d desired and enter	the appropriate fee b	elow):		
	<u>Fee</u>	Small Entity F	<u>ee</u>		
One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ <u>120.0</u>		
Two months (37 CFR 1.17(a)(2))	\$450	\$225	\$		
Three months (37 CFR 1.17(a)(3))	\$1020	\$510	\$		
Four months (37 CFR 1.17(a)(4))	\$1590	\$795	\$		
Five months (37 CFR 1.17(a)(5))	\$2160	\$1080	\$		
☐ A check in the amount of the fee is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☐ The Director has already been authorized to charge fee	es in this applicatio	on to a Deposit Acc	ount.		
Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fee The Director is hereby authorized to charge any fees w	hich may be requi	red, or credit any o duplicate copy of	verpayment, t this sheet.		
Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fee The Director is hereby authorized to charge any fees w Deposit Account Number 11-0160 WARNING: Information on this form may become public. Credit	hich may be requi	red, or credit any o duplicate copy of	verpayment, to this sheet.		
Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge fee The Director is hereby authorized to charge any fees w Deposit Account Number 11-0160 WARNING: Information on this form may become public. Credit Provide credit card information and authorization on PTO-2038	thich may be required to the control of the control	red, or credit any on duplicate copy of all duplicate copy of the line of the	verpayment, t this sheet.		
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Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge feel. The Director is hereby authorized to charge any fees w Deposit Account Number 11-0160 WARNING: Information on this form may become public. Credit Provide credit card information and authorization on PTO-2038 I am the applicant/inventor assignee of record of the entire interess Statement under 37 CFR 3.73(b) is attorney or agent of record. Registration attorney or agent under 37 CFR 1.34(a Registration number if acting under 37 CFR	thich may be required hich may be required have enclosed at card information should be	red, or credit any on duplicate copy of lid not be included on the province of	verpayment, t this sheet.		
Payment by credit card. Form PTO-2038 is attached. The Director has already been authorized to charge feel. The Director is hereby authorized to charge any fees we Deposit Account Number	t. See 37 CFR 3.7 s enclosed. (Formon Number: 29,91). R 1.34(a)	red, or credit any on duplicate copy of lid not be included on the province of	verpayment, t this sheet.		

This collection of information is required by 37 CFR 1.136(a). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 6 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/17 (12-04)
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	Complete if Known			
Effective on 12/08/2004 Effective on 12/08/2004 CRAPHONIC STREET OF THE CONSOLIDATED APPROPRIATE STREET APPROPRIATE S	Application Number	10/604,437		
FEE TRANSMITTAL	Filing Date	July 21, 2003		
LEE IKANSMITTAL	First Named Inventor	Scherff, William Louis		
for FY 2005	Examiner Name	Thissell, Jennifer I.		
Applicant claims small entity status. See 37 CFR 1.27	Art Unit	3635		
TOTAL AMOUNT OF PAYMENT (\$) 1,120.00	Attorney Docket No.	714595.114		

☐ Check ☐ Credit of	card 🔲 M	1oney Order [None	Other (ple	ease specif	ÿ):		
Deposit Account	Deposit A	Account Number	11-0160	Deposit Acco	ount Name _	Blackwell Sa	nders Peper Mart	in, LLP
For the above-identified d	eposit acco	unt, the Director	is authorize	ed to: (check all t	hat apply)			-
⊠Charg	e fees inc	dicated below	. \square	Charge fee(s) indicated	d below, exc	ept for the f	iling fee
Charge	any additio	nal fee(s) or	\boxtimes	Credit any c	verpayme	nts		
underpa	ayments of	fee(s) under 37 (CFR 1.16 a	nd 1.17				
WARNING: Information o					n should not	be included on t	this form. Provid	e credit card
information and authorizat	tion on PTO)-2038						
FEE CALCULATION								
1. BASIC FILING, SE	ARCH AN	D EXAMINAT	ION FEE	S				
·	FILING F	FEES	SEARCH	FEES	EXAMIN	ATION FEES		
	<u>S</u>	mall Entity		Small Entity		Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	<u>Fee (\$)</u>	Fee (\$)	Fees paid (5)
Utility	300	150	500	250	200	100		
Design	200	100	100	50	130	65		
Plant	200	100	300	150	160	80		
Reissue	300	150 -	500	250	600	300		
Provisional	200	100	0	0	0	0		
2. EXCESS CLAIM FE	ES							all Entity
Fee Description								<u>Fee(\$)</u>
Each claim over 20 or, for							50	25
Each independent claim ov	-	r Reissues, each i	ndepender	nt claim more th	an in the orig	inal patent	200	100
Multiple dependent claims							360	180
Total Claims	Extra C			ee Paid (\$)		pendent Claim		
20 or HP				400.00	<u>Fee (\$)</u>	<u>Fee Pa</u>	<u>id (\$)</u>	
HP= highest number of	or total cla	ilms paid for, if	greater ti	nan 20				
Indep. Claims	<u>Extra Cl</u>			ee Paid (\$)				
8 - 5 or HP				600.00				
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3. APPLICATION SIZ		1.400						
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each additional 50 shee							- (A) F	D_:4 (#)
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4. OTHER FEE(S)							Fee Paid (¢)
Non-English Specification	n ¢130) fee (no small :	entity disc	count)			<u>rec raiu (</u>	<u> 41</u>
Other: One month			citicy disc	-curicy			\$120.00	_
· One mond	· CACCI ISIOI	,					<u> </u>	_

SUBMITTED BY		
Signature	Registration No. (Attorney/Agent)	Telephone 314-345-6000
Name (Print/Type) Samuel D	igirolamo	Date 2) Dec 04

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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